

STATE OF NEW HAMPSHIRE
Full Time Active Employee Working Rates

11/26/2013 3:08 PM

for Unrepresented (Classified, Unclassified, Non-Classified, HR Confidential), SEA, NEPBA, and Teamsters
 Effective 1/1/2014

DENTAL EE CONTRIBUTION			DENTAL ER CONTRIBUTION		W RATE
	<u>26 PP</u>	<u>ANNUAL</u>	<u>26 PP</u>	<u>ANNUAL</u>	<u>TOTAL</u>
HL-1: 1 PERSON	\$1.00	26.00	\$17.88	\$464.88	\$490.88
HL-2: 2 PERSON	\$2.00	52.00	\$34.12	\$887.12	\$939.12
HL-3: 1 FAMILY	\$3.00	78.00	\$60.25	\$1,566.50	\$1,644.50

<u>MONTHLY WORKING RATES</u>	
DN-1: 1 PERSON	\$40.90
DN-2: 2 PERSON	\$78.26
DN-3: FAMILY	\$137.04

DELTA DENTAL

<u>WEEKLY</u> <u>HRS</u> <u>RANGE</u>	<u>COMPANY-STATE SHARE (323A)</u>				<u>EMPLOYEE SHARE (321A/322A) NEW</u>			
	<u>TYPE</u>	<u>PLAN</u>	<u>AMT PER</u>		<u>TYPE</u>	<u>PLAN</u>	<u>AMT PER</u>	
			<u>26 PP</u>				<u>26 PP</u>	
FULL TIME	DN	1	\$17.88		DN	1	\$1.00	
FULL TIME	DN	2	\$34.12		DN	2	\$2.00	
FULL TIME	DN	3	\$60.25		DN	3	\$3.00	